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FACSIMILE TRANSMITTAL SHEET

TO:	Examiner William C. JUNG	FROM:	Stephen T. Neal
COMPANY:	USPTO	DATE:	September 15, 2005
FAX NUMBER:	(571) 273-8300	TOTAL NO. OF PAGES INCLUDING COVER:	71
PHONE NUMBER:		SENDER'S REFERENCE NUMBER:	13309/1 (Old Docket No.: STAN-144/04US)
RE:	Serial No.: 09/662,224	YOUR REFERENCE NUMBER:	Group Art Unit: 3737

☐ URGENT ☒ FOR REVIEW ☐ PLEASE COMMENT ☐ PLEASE REPLY ☐ CONFIRMATION
☐ ORIGINAL WILL FOLLOW ☒ ORIGINAL WILL NOT FOLLOW

Notes/Comments:

AMENDMENT AND REQUEST FOR CONTINUED EXAMINATION (RCE)

1. Fax Cover Sheet (1)
 2. RCE Transmittal Form (and one copy) (2)
 3. RCE Fee Transmittal (and one copy) (2)
 4. Amendment and Request for Continued Examination (RCE) (66)
- Total: (71) pages

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Certificate of Facsimile Transmittal

I hereby certify that the above referenced correspondence is being transmitted via facsimile under 37 C.F.R. §1.11 to Examiner William C. JUNG at facsimile number: (571) 273-8300 at the United States Patent and Trademark Office.

Dated: September 15, 2005Signature: 

Barbara Vance

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SEP-16-2005 09:17

KENYON KENYON

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U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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<h1>FEE TRANSMITTAL</h1> <h2>for FY 2005</h2> <p>Effective 10/01/2004. Patent fees are subject to annual revision.</p>		Complete if Known		
		Application Number	09/662,224	
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Filing Date	September 14, 2000	
		First Named Inventor	Philipp LANG et al.	
		Examiner Name	William C. JUNG	
		Art Unit	3737	
TOTAL AMOUNT OF PAYMENT (\$)		395.00	Attorney Docket No.	13309/1

METHOD OF PAYMENT (check all that apply) <input type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None		3. ADDITIONAL FEES																																																																																																																																																																																																	
<input checked="" type="checkbox"/> Deposit Account: Deposit Account Number: 11-0600 Deposit Account Name: Kenyon & Kenyon The Director is authorized to: (check all that apply) <input checked="" type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments <input checked="" type="checkbox"/> Charge any additional fee(s) or any underpayment of fee(s) <input checked="" type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.		<table border="1"> <thead> <tr> <th>Large Entity</th> <th>Small Entity</th> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td></td><td></td><td>1051</td><td>130</td><td>Surcharge - late filing fee or oath</td><td></td></tr> <tr><td></td><td></td><td>1052</td><td>50</td><td>Surcharge - late provisional filing fee or cover sheet</td><td></td></tr> <tr><td></td><td></td><td>1053</td><td>130</td><td>Non-English specification</td><td></td></tr> <tr><td></td><td></td><td>1812</td><td>2,520</td><td>For filing a request for ex parte reexamination</td><td></td></tr> <tr><td></td><td></td><td>1804</td><td>920*</td><td>Requesting publication of SIR prior to Examiner action</td><td></td></tr> <tr><td></td><td></td><td>1805</td><td>1,840*</td><td>Requesting publication of SIR after Examiner action</td><td></td></tr> <tr><td></td><td></td><td>1251</td><td>120</td><td>Extension for reply within first month</td><td></td></tr> <tr><td></td><td></td><td>1252</td><td>450</td><td>Extension for reply within second month</td><td></td></tr> <tr><td></td><td></td><td>1253</td><td>1,020</td><td>Extension for reply within third month</td><td></td></tr> <tr><td></td><td></td><td>1254</td><td>1,580</td><td>Extension for reply within fourth month</td><td></td></tr> <tr><td></td><td></td><td>1255</td><td>2,160</td><td>Extension for reply within fifth month</td><td></td></tr> <tr><td></td><td></td><td>1401</td><td>500</td><td>Notice of Appeal</td><td></td></tr> <tr><td></td><td></td><td>1402</td><td>500</td><td>Filing a brief in support of an appeal</td><td></td></tr> <tr><td></td><td></td><td>1403</td><td>1,000</td><td>Request for oral hearing</td><td></td></tr> <tr><td></td><td></td><td>1451</td><td>1,510</td><td>Petition to institute a public use proceeding</td><td></td></tr> <tr><td></td><td></td><td>1452</td><td>500</td><td>Petition to revive - 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SUBMITTED BY		Complete if applicable	
Name (Print/Type)	Stephen T. Neal	Registration No. (Attorney/Agent)	47,815
Signature	<i>Stephen T. Neal</i>	Telephone	(408) 975-7500
		Date	September 15, 2005

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